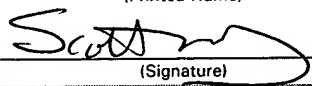


16086 U.S. PTO
09/10/03

Atty. Dkt. No. 023720-0338

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Richter et al.
Title: MERCHANDISING SYSTEM
Application No.: To Be Determined
Filing Date: To Be Determined
Examiner: To Be Determined
Art Unit: To Be Determined

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
EL 979071371 US	September 10, 2003
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SCOTT M. DAY	
(Printed Name)	
	
(Signature)	

22141 U.S. PTO
10/659736
09/10/03

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

UTILITY PATENT APPLICATION
TRANSMITTAL

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Gary M. Richter
2931 Sandra Lane
Waukesha, Wisconsin 53188

M. Scott Bryson
26200 Glenmaura Pl.
Brookfield, Wisconsin 53005

Terrence G. Berglund
5351 S. 104th Street
Hales Corners, Wisconsin 53130

[] Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- ☒ Specification, Claim(s), and Abstract (20 pages).
- ☒ Informal drawings (7 sheets, Figures 1-8).
- ☐ Declaration and Power of Attorney (4 pages).
- ☐ Assignment of the invention to DCI Marketing, Inc.
- ☐ Assignment Recordation Cover Sheet.
- ☐ Check in the amount of \$40.00 for Assignment recordation.
- ☐ Small Entity statement.
- ☐ Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
- ☐ Information Disclosure Statement.
- ☐ Form PTO/SB/08 with copies of ___ listed reference(s).
- ☒ Application Data Sheet (37 CFR 1.76).
- ☐ Claim for Convention Priority.

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$750.00	\$750.00
Total Claims:	34	- 20	= 14	x \$18.00	= \$252.00
Independents:	5	- 3	= 2	x \$84.00	= \$168.00
If any Multiple Dependent Claim(s) present:				+ \$280.00	= \$0.00
				SUBTOTAL:	= \$1170.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):					= \$0.00
				TOTAL FILING FEE:	= \$1170.00

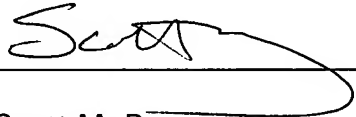
- ☒ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

- [] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 9/10/03

By 

FOLEY & LARDNER
Suite 3800
777 East Wisconsin Avenue
Milwaukee, Wisconsin 53202-5306
Telephone: (414) 297-5872
Facsimile: (414) 297-4900

Scott M. Day
Attorney for Applicant
Registration No. 52,801